

Superior Court of Washington, County of _____

In re custody of:

Children:

Petitioner/s (*person/s who started this case*):

Respondents (*parents and any guardian or custodian*):

No. _____

Response to Non-Parent Custody Petition
(RSP)

Response to Non-Parent Custody Petition

1. Your response

Look at each section of the *Petition*. Check below to say if you agree or disagree with what the other party said in each section, or say if you don't know because you don't have enough information. (If you disagree with any part of a section, check "I disagree.") List your reasons for disagreeing on page 2.

Section in the Petition	Your response (<i>check one</i>)		
1. <i>Petitioner's Information</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
2. <i>Children</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
3. <i>The following adults live in Petitioner's household</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
4. <i>Respondents' Information</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
5. <i>Why the children should not live with a parent</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
6. <i>Why the children should live with Petitioners</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
7. <i>Respondents' Visitation</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know

Section in the Petition	Your response (<i>check one</i>)		
8. <i>Support, insurance, and taxes</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
9. <i>Personal jurisdiction over Respondents</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
10. <i>Children's Home/s</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
11. <i>Other people with a legal right to spend time with a child</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
12. <i>Other court cases involving a child</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
13. <i>Are any of the children Indian children</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
14. <i>Jurisdiction over Indian children</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
15. <i>Jurisdiction over the children</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
16. <i>Protection Order</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
17. <i>Restraining Order</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
18. <i>Fees and costs</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know
19. <i>Other requests, if any</i>	<input type="checkbox"/> I agree	<input type="checkbox"/> I disagree	<input type="checkbox"/> I don't know

If you checked "Disagree" for any of the sections, list your reasons here:

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

Section #: _____ Reasons: _____

(If you need more space, you may add more pages to this Response. Number, date and sign each page that you add.)

2. Request

I ask the court to:

- ☐ deny the *Non-Parent Custody Petition*.
- ☐ give custody to Petitioners but grant my requests in sections **3 - 7** below.
- ☐ give custody to Petitioners and approve **all** the requests listed in the *Petition*. (Skip to section **7** and sign at the end.)

3. Respondents' Visitation

If the court gives custody to Petitioners, I ask the court to (check one):

- ☐ approve my proposed *Residential Schedule* (form FL Non-Parent 405).
- ☐ other: _____.

4. Protection Order

Do you want the court to issue an Order for Protection as part of the final orders in this case?

- ☐ **No.** I do not want an *Order for Protection*.
- ☐ **Yes.** (You must file a *Petition for Order for Protection*, form DV-1.015 for domestic violence, or form UHST-02.0200 for harassment. You may file your *Petition for Order for Protection* using the same case number assigned to this case.)

Important! If you need protection **now**, ask the court clerk about getting a *Temporary Order for Protection*.

- ☐ **There already is an Order for Protection between (name): _____ and me.** (Describe):

Court that issued the order: _____

Case number: _____

Expiration date: _____

5. Restraining order

Do you want the court to issue a Restraining Order as part of the final orders in this case?

☐ **No.** (Skip to **6.**)

☐ **Yes.** Check the type of orders you want:

☐ **Do not disturb** – Order (name/s) _____ not to disturb my peace or the peace of any child listed in the *Petition*.

☐ **Stay away** – Order (name/s) _____:

☐ Not knowingly to go or stay within _____ feet of my home, workplace, or school, or the daycare or school of any child listed in the *Petition*.

☐ To stay away from my home, workplace, or school, and the daycare or school of any child listed in the *Petition*.

☐ **Do not hurt or threaten** – Order (name/s) _____:

- Not to assault, harass, stalk or molest me or any child listed in the *Petition*; and
- Not to use, try to use, or threaten to use physical force against me or the children that would reasonably be expected to cause bodily injury.

Warning! If the court makes this order, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

☐ **Prohibit weapons and order surrender** – Order (name/s) _____:

- Not to possess or obtain any firearms, other dangerous weapons, or concealed pistol license until the Order ends, and
- To surrender any firearms, other dangerous weapons, and any concealed pistol license that he/she possesses to (check one): ☐ the police chief or sheriff. ☐ his/her lawyer. ☐ other person (name): _____.

☐ **Other restraining orders:** _____

Important! If you want a restraining order **now**, you must file a Motion for Temporary Non-Parent Custody Order and Restraining Order (form FL Non-Parent 423) or a Motion for Immediate Restraining Order (Ex Parte) (form FL Non-Parent 421).

6. Fees and costs

☐ No request.

☐ Order who should pay for court costs, guardian ad litem fees, lawyer fees, and other reasonable fees.

7. Other requests, if any

Respondent fills out below:

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form (including any attachments) are true.

☐ I have attached (*number*): _____ pages.

Signed at (*city and state*): _____ Date: _____



Respondent signs here

Print name

I agree to accept legal papers for this case at (*check one*):

☐ my lawyer's address, listed below.

☐ the following address (*this does **not** have to be your home address*):

street address or PO box

city

state

zip

(**Optional**) email: _____

(*If this address changes before the case ends, you **must** notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120).)*)

Important! You must fill out and file a *Confidential Information* form (FL All Family 001) with the court clerk.

Lawyer (if any) fills out below:



Lawyer signs here

Print name and WSBA No.

Date

Lawyer's street address or PO box

city

state

zip

Email (*if applicable*): _____